

June 22, 2008

**RE: Mental Health Services Act (MHSA) Year 2 Progress Report
Community Services and Supports
Reporting Period: January – December 2007**

**2007 Implementation Progress Report for Placer County's
MHSA-Community Services and Supports Programs.**

Comment #1. Nami-Placer County members were aware that this report was out for public review and as of 5 June 2008, could not locate it on the internet. NAMI-PC talked to the Campaign for Community Wellness (Streamline) people on that afternoon and they couldn't locate it easily either. So on page 15 "This report is being posted for a 30-day public..." should state where these are POSTED. **If people looking for this can't find it, how is the public going to be able to tract it?"**

Comment #2 Page 3

Overview of TAY, Adult and Older Adult FSP

...the number of consumers in long-term placements decreased by 34% in 2007. That may be true however NAMI families/clients in trouble that were already under this county's mental health care that were not in long-term placements could not assess (ie. WIT programs as it was full) and therefore one client in currently at NAPA State Hospital and one other one committed suicide. County must do better with services to those clients/families **ALREADY BEING SERVICED IN THIS COUNTY VS LONG-TERM CLIENTS.**

Comment #2. Under a. Was MHSA money used to secure the 4 bedroom house? or just to support the program ONLY with the FSP?

Comment #3. Under d. "Placer put out a RFP..."

County assumes that everyone knows what that stands for without explanation. NAMI-PC is suggesting that an attachment of "shortcuts/initials" be included on these types of reports so the public will know what they are. (Another example is THP-Plus)

Comment #4. Under e. "...contract to serve 30 additional...involved in criminal justice." GOOD FOR YOU, it's about time. According to a 2006 study by the U.S. Justice Department, **56% of state prisoners, 45% of federal prisoners and 64% of local jail inmates suffer from mental illnesses.** In fact, there are now more individuals with a serious mental illness in state prisons than in state mental hospitals.

Comment #5. Under Welcome Center

All year long the Mental Health Drug and Alcohol Board had been giving figures of **50 consumers a day use the Welcome Center.** 35 consumers are believed to be a little high but livable with 50 never was. It appears to be working better and improving as a "**client run center**".

This leads to our last comment.

NAMI-Placer County has board representation and several members have attended all the meetings this year at the MH Drug & Alcohol Board. When this board and or its committees ask for information it takes months to get it back to them. Example: Several months ago the QA of committee of this board requested information on 5150's (see Attachment A). This report shows a total of 1005 clients were (5150's at Sutter) but **Page 8 shows:** "Approximately 2000 individuals were evaluated and received crisis intervention at hospital sites." **DOUBLED**

IF THE MH DRUG & ALCOHOL BOARD CAN NOT DEPEND ON CURRENT AND ACCURATE DATA REQUESTED. THEN HOW CAN WE COMPARE FIGURES IN THIS REPORT?

Some current information requested includes:

#1 In the PIP report this county went from 12 to 14 weeks for a new-county client services to 8 days maximum for a new routine psychiatrist appointment. PIP report held at 12 to 14 weeks for 4 years (and 4 reorganizations) then all of a sudden since Oct 2007 it is now 8 days. **This was not a "slow change" BUT almost instant change. Therefore that is hard to believe that data is correct.**

#2 A request for the Co-occurring client update (that were in Cypress house) has been requested to see if they are doing well and continued their recovery?

#3 Financial breakdowns. Never has breakdown of how the mental health money is being spent been given to this board other than in lump sums. We see contract for FSP in lump sums. So where we would like to see is:

1. Furnish a list of all FSP contracted with their lump sum for that contract is fine. **BUT**
2. Total all of the FSP Contracts AND THEN give us the money “leftover” that is spend by the County for Mental Health System (Since Children’s receives a match for Adult, as we understand it). Break them down.
3. How is the old money spent? and on what?
4. Regarding the MHSA money and Placer’s 7 programs. Break it down.
5. How much was spent on the different individual programs broken down. IE: (WIT program)? How much was spent in (TRAY) Program? How much was spent in the (Welcome Center) Program?
Example: How much for utilities? How much art supplies? How much for food for Community Wellness meetings? How much for rent at “Gateway”? How much was spent in gas, maintenance and insurance for those three cars that where purchased with MHSA money and who uses them? How many cell phones & cell phone plans did the county buy? How is “Listening well” being financed now, and under what program? Break it down by program and types of expenses. How much money was spent on those 100’s of computers? How of these computers were GIVEN to FSP on top of their contract fees to help them work with the county?
What other expenses does the county paid for on outside of the contracts for FSP under mental health money? How was the “one-time start up” money used?
6. What percent of MHSA money really gets down to the clients level. 50 cents on the dollar? 10 cents? less than that?
7. What happened to the funds set aside for the “elder van”? is it still in the plan?

8. The Campaign for Community is already being total that the NEWLY required “MSHA reserve fund by the year 2010” will most likely to short. Placer County Mental Health Department HAS absolute control over the money and how it really is spent. NOT THE PEOPLE, NOT THE BOARDS and no accounting have ever been given of these expenditures to any committee\board that NAMI-PC knows of and who authorizes these expenses? **WHO WILL BE RESPONSIBLE IF FUNDING IS SHORT?** County Mental Health Department ONLY and its unknown staff that spent it.

NAMI-Placer County CAN NOT EXPRESS ENOUGH THAT REQUESTED INFORMATION ALWAYS TAKES MONTHS TO GETTING TO THIS BOARD AND SELDOM MATCHES OTHER FIGURES. (Such as your information regarding suicide of 25 people off the Foresthill Bridge for 10 years). WE ALSO BELIEVE THAT THIS BOARD SHOULD BE INFORMED SOONER OF PENDING ACTIONS THAT MIGHT INVOLVE THIS BOARD AND THE CLIENT/FAMILIES OF MENTALLY ILL IN THIS COUNTY.

NAMI-Placer County realizes that figures change, but does not trust counties figures any longer, as the difference is always too radical between requested information and publish information. Therefore don't trust your figures and because county has YET to furnish valuable requested information to this board and other committees.

Currently some requested information has yet to be given to NAMI-PC and/or the Mental Health Drug & Alcohol Board. Therefore NAMI-PC can NOT state as public, parents, clients and/or families that services in Placer County Mental Health Department is doing well in its second year of the three year plan.

IN ADDITION if this county had approximately 2000 (5150's) in the year 2007 and the client base is approximately 1800 to 2000.

We believe that for some reason this county is NOT “out of the woods yet” in providing proper services to the clients.

NAMI-PC told you to expect more clients entering the system because of economics, and the war.

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